

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.
10829016

FILING DATE

APPLICANT(S)

	CLAIMS					
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/		1			
2						
3	2		2			
4	2		2			
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16	2		2			
17	2		2			
18	1		1			
19	1		1			
20	1		1			
21	2		2			
22	2		2			
23	1		1			
24						
25						
26						
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41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	3		3			
TOTAL DEP.	24	→	26	→		
TOTAL CLAIMS	29		29			

23
4
27
4

TOTAL IND.
TOTAL DEP.
TOTAL CLAIMS